Form (RF-3)	SUMM	ARY SHEET	
-	in Company's premium effective1/1/06	or rate level produced by rate	·
(1) Coverage	3	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenge Commercial 2. Automobile Physical Private Passenge Commercial 3. Liability Other Than 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Pe 14. Crop Hail 15. Other Line of Insura	Damage Auto DIVISION OF INSURANCE DIVISION OF INSURANCE PRINCE OF ILLUNOISIDEPR NOV 1 A 2005 ril NOV 1 A 2005	\$157,242 ain class(s)? If so, specify:	0.5%
Brief description of filing. Adoption of Surety Associ- multiplier of 1.308	(If filing follows rates of a ation of America's 2005	an advisory organization, specif Revised Loss Costs, using our	y organization): current loss cost
* Adjusted to reflect all p ** Change in Company's p	oremium level which will	result from application of new r	
	Nar	ne of Company	

Dorothy L. Todd, Senior Filing Analyst
Official - Title

Form	ı (RF-3)	SUMMARY SHEET	
		ny's premium or rate level produced by rate 1/1/06	·
	(1)	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
	<u>Coverag</u> e	Premium volume	(+ 01 -)
2. 3. 4. 5. 6. 7. 8. 9.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery DIVISION Fire Extended Coverage Inland Marine		0.5%
12. 13. 14. 15.	Homeowners Commercial Multi-Peril SPRIN Crop Hail Other Line of Insurance	tory(s) or certain class(s)? If so, specify:	
Adop	description of filing. (If filing fol otion of Surety Association of An plier of 1.453	llows rates of an advisory organization, spec merica's 2005 Revised Loss Costs, using ou	eify organization): r current loss cost
* A ** C		hanges. evel which will result from application of new GRANITE STATE INSURANCE COMPAN Name of Company Dorothy L. Todd, Senior Filing Analyst	
		Official - Title	

Form (RF-3)	SUMMARY SHEET	
Change in Co revision effec	ompany's premium or rate level produced by rate ctive1/1/06	<u></u> .
(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change(+ or -)**
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril	age \$434,502 ION OF INSURANCE TE OF ILLINOIS/IDEPR ECEBVED NOV 1 4 2005 RINGFIELD, ILLINOIS	0.5%
Does filing only apply to certain	territory(s) or certain class(s)? If so, specify:	
Brief description of filing. (If filin Adoption of Surety Association of multiplier of 2.179	ng follows rates of an advisory organization, specify of America's 2005 Revised Loss Costs, using our cu	organization): rrent loss cost
* Adjusted to reflect all prior ra ** Change in Company's premit	ate changes. um level which will result from application of new rate THE INSURANCE COMPANY OF THE STATE	

Dorothy L. Todd, Senior Filing Analyst
Official - Title

Name of Company

For	rm (RF-3) SUMMA	ARY SHEET	
	Change in Company's premium revision effective 1/1/06	or rate level produced by rate	
	(1)	(2) Statewide Annual	(3) Percent Change
	Coverage	Premium Volume *	(+ or -)**
	Automobile Liability Private Passenger Commercial Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	\$335,718	0.5%
8.	Boiler and Machinery	Altra -	
9.	Fire DIVISION OF INSURANCE		
10.			
11.	inianu wanne		
12.	Homeowners NOV 1 4 2005		
13.			
14.	Crop Hail		
15.			
	Line of Insurance		
_			
Doe	s filing only apply to certain territory(s) or certa	in class(s)? If so, specify:	
			- <u> </u>
	· · · · · · · · · · · · · · · · · · ·		
Ado	f description of filing. (If filing follows rates of a ption of Surety Association of America's 2005 tiplier of 1.598	· •	•
			

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, I Name of Company

Dorothy L. Todd, Senior Filing A	nalyst
Official - Title	

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercia		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity	540.040	10% (Overall)
7. Surety	543,946	10% (Overall)
Boiler and Machinery Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of Insurance		
Does filing only apply to certain territor	y (territories) or certain classes? If so, specify:	Yes-Class Codes 203, 204, 213, 214
Brief description of filing. (If filing follow As fiduciary rates are subject to a slidir	vs rates of an advisory organization, specify organization, specif	ganization): tructure is 10%.
As fiduciary rates are subject to a slidir *Adjusted to reflect all prior rate change	ng scale, the overall combined change in rate s	tructure is 10%.
As fiduciary rates are subject to a slidir *Adjusted to reflect all prior rate change	es. which will result from application of new rates. Old Rep	ublic Surety Company
As fiduciary rates are subject to a slidir *Adjusted to reflect all prior rate change	es. which will result from application of new rates. Old Rep	tructure is 10%.
As fiduciary rates are subject to a slidir *Adjusted to reflect all prior rate change	es. which will result from application of new rates. Old Rep	ublic Surety Company lame of Company
As fiduciary rates are subject to a slidir *Adjusted to reflect all prior rate change	es. which will result from application of new rates. Old Rep	ublic Surety Company

